UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPT

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	DATE RECEIV	ED	ĺ
TION	L.,	<u> </u>	_

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Grapevine & Philadelphia Filing Under (Check box(es) that apply):	ULOE RECEIVED
A. BASIC IDENTIFICATION DATA	// a. w 0000
1. Enter the information requested about the issuer	MAR 2 7 2007
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Grapevine & Philadelphia, LLC	199
Address of Executive Offices (Number and Street, City, State, Zip Code) 8401 Jackson Road, Sacramento, CA 95826	Telephone Number (Including Area Code) (916) 381-1561
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Purchase, finance, development, operation, management and sale of commercial/industrial	real estate.
Type of Business Organization corporation business trust limited partnership, already formed limited partnership, to be formed limited liability	olease specify): ity company
Actual or Estimated Date of Incorporation or Organization: Month Year Actual or Estimated Date of Incorporation or Organization: Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	mated ::

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Capies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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2. Enter the information req	uested for the following	owing:	· · · · · · · · · · · · · · · · · · ·						
• Each promoter of the	e issuer, if the iss	uer has been o	rganized wi	thin th	ne past five years;				
 Each beneficial owner 	er having the powe	er to vote or dis	pose, or dire	ect the	vote or disposition (of, 109	% or more o	f a clas	s of equity securities of the issue
 Each executive offic 	er and director of	corporate issu	ers and of o	corpora	ate general and man	aging	partners of	partne	rship issuers; and
 Each general and ma 	anaging partner of	partnership is	suers.						
Check Box(es) that Apply:	Promoter	Benefici	al Owner		Executive Officer		Director	Ø	General and/or Managing Partner
Full Name (Last name first, if Grapevine JP/PI, LLC	individual)				<u>.</u>				
Business or Residence Address 8401 Jackson Road, Sacr	•		ate, Zip Co	de)				-	
Check Box(es) that Apply:	Promoter	☐ Benefici	al Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individual)								
Business or Residence Address	s (Number and	Street, City, St	ate, Zip Co	de)					
Check Box(es) that Apply:	Promoter	Benefici	al Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individual)								
Business or Residence Address	s (Number and	Street, City, St	ate, Zip Co	de)					
Check Box(es) that Apply:	Promoter	Benefici	al Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individual)							-	
Business or Residence Address	s (Number and	Street, City, St	ate, Zip Co	de)					
Check Box(es) that Apply:	Promoter	Benefici	ial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individual)								
Business or Residence Address	s (Number and	Street, City, St	tate, Zip Co	de)		•		_	
Check Box(es) that Apply:	Promoter	Benefic	ial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individual)								
Business or Residence Addres	s (Number and	Street, City, St	tate, Zip Co	ode)					
Check Box(es) that Apply:	Promoter	☐ Benefic	ial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, if	individual)						-		
Business or Residence Addres	s (Number and	Street, City, S	tate, Zip Co	ode)					
	(Use bla	nk sheet, or co	py and use	additio	onal copies of this s	heet,	as necessar	y)	

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					II. to non-a	ccredited i	nvestors in	this offeri	ng?		Yes	No ⊠
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								_	_			
2. What is the minimum investment that will be accepted from any individual?										s_0.0	0	
3. Does th	ne offering	permit join	t ownershi	p of a sing	le unit?	•		•••••			Yes □	No E
commi: If a per or state	ssion or sim son to be lis s, list the na	ilon request ilar remune sted is an ass ame of the b you may s	ration for s sociated pe roker or de	olicitation rson or age aler. If mo	of purchase nt of a brok ore than five	ers in conne er or deale c (5) person	ction with r registered is to be list	sales of sec I with the S ed are asso	curities in t EC and/or	he offering. with a state		
Full Name (Last name	first, if ind	ividual)									
Business or	Residence	Address (N	lumber and	l Street, Ci	ty, State, Z	(ip Code)				·		
Name of As	sociated B	roker or De	aler									
States in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit l	Purchasers						
(Check	"All State:	s" or check	individual	States)	••••	******		***************************************		***************************************	□ ∧1	States
AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Full Name (Last name	first, if ind	ividual)									
Business o	r Residence	: Address (1	Number an	d Street, C	ity, State, 2	Zip Code)	.,					
Name of As	sociated B	roker or De	aler									
States in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Check	"All State:	s" or check	individual	States)			**************	***************************************		***************************************	☐ AI	l States
AL IL MT	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full Name	(Last name	first, if ind	ividual)			··						-
Business o	r Residence	Address (Number an	d Street, C	ity, State, 2	Zip Code)	<u> </u>					
Name of As	sociated B	roker or De	aler									
States in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Check	"All State	s" or check	individual	States)		•••••				***************************************	☐ AI	l States
AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1,	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price	Amount . Solo	•
	Debt	s 0.00	s 0.00	
	Equity		\$ 0.00	
	Common Preferred			
	Convertible Securities (including warrants)	s 0.00	0.00 \$	
	Partnership Interests		\$ 0.00	
	Other (Specify membership interest			00.00
	Total	1,000,000.00	s 1,000,0	00.00
	Answer also in Appendix, Column 3, if filing under ULOE.	*	- '	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Accredited Investors	Number Investors	Aggr Dollar A of Purc § 1,000	chases
	Non-accredited Investors			·
			\$ 1,000	.000.00
	Total (for filings under Rule 504 only)	4	<u> </u>	
_	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.	·		
		Type of		Amount
	Type of Offering	Security	Sol \$ 0.00	đ
	Rule 505			
	Regulation A		s 0.00 s 0.00	
	Rule 504			
	Total		\$_0.00	
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			0.00
	Printing and Engraving Costs		\$ 0.00	
	Legal Fees		\$_0.00	
	Accounting Fees		\$ 0.00	
	Engineering Fees		\$ 0.00	
	Sales Commissions (specify finders' fees separately)		\$ 0.00	
	Other Expenses (identify)	_	\$ 0.00	
	MP . 1	_	10.000	0.00

	C. OFFERING PRICE, NUMI	BER OF INVESTORS, EXPENSES AND USE OF PI	ROCEEDS	·
	b. Enter the difference between the aggregate offeri and total expenses furnished in response to Part C—o proceeds to the issuer."	ing price given in response to Part C — Question 1 Question 4.a. This difference is the "adjusted gross		\$
i.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees			
	Purchase of real estate		 \$	\$ 990,000.00
	Purchase, rental or leasing and installation of mac and equipment	hinery [\$. 🗆 \$
	Construction or leasing of plant buildings and faci			
	Acquisition of other businesses (including the val- offering that may be used in exchange for the asse issuer pursuant to a merger)	ts or securities of another	¬ s	□\$
	Repayment of indebtedness			
	Working capital			
	Other (specify):			
		1		
				. [] s
	Column Totals	[s 0.00	990,000.00
	Total Payments Listed (column totals added)		□ \$ <u>_9</u>	00,000,00
		D. FEDERAL SIGNATURE		Š
ign	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	undersigned duly authorized person. If this notice	sion, upon writte	tle 505, the following
ssu	er (Print or Type)	Signature	Date	
	apevine & Philadelphia, LLC	natasha Zerhauer	3/23/	67
				
Van	ne of Signer (Print or Type)	Title of Signer (Print or Type)		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)